

RECEIVED  
CENTRAL FAX CENTER

DEC 09 2005

PTO/SB/83 (04-05)

Approved for use through 11/30/2005, OMB 0851-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/768,232
	Filing Date	January 30, 2004
	First Named Inventor	E GOTTFURCHT
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	578962000102

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.  
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
 the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

This request is being made at the request of MailTV.

**CORRESPONDENCE ADDRESS**

1.  The correspondence address is NOT affected by this withdrawal.  
 2.  Change the correspondence address and direct all future correspondence to:

The address associated with Customer Number:

OR

Firm or Individual Name: Steptoe & Johnson LLP  
c/o Scott W. Doyle, Esq.

Address: 1330 Connecticut Avenue, NW

City: Washington State: DC Zip: 20036

Country: U.S.A.

Telephone: (202) 429-6227 Email: [sdoyal@steptoe.com](mailto:sdoyal@steptoe.com)

Signature: 

Name: Thomas E. Ciotti

Registration No.: 21,013

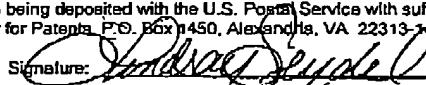
Date: December 9, 2005

Telephone No.: (650) 813-5702

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 9, 2005

Signature:  (Lindsay Seydel)

pa-1031134

PAGE 3/7 \* RCVD AT 12/9/2005 10:04:52 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/24 \* DNIS:2738300 \* CSID:650 813 5993 \* DURATION (mm:ss):02:26

## BEST AVAILABLE COPY

PTO/SB/83 (04-05)

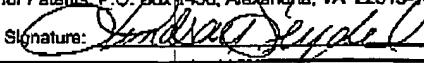
Approved for use through 11/30/2005. OMB 0651-0035  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/768,232
	Filing Date	January 30, 2004
	First Named Inventor	E GOTTFURCHT
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	578962000102

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
<p>Please withdraw me as attorney or agent for the above identified patent application, and</p> <p><input checked="" type="checkbox"/> all the attorneys/agents of record.</p> <p><input type="checkbox"/> the attorneys/agents (with registration numbers) listed on the attached paper(s), or</p> <p><input type="checkbox"/> the attorneys/agents associated with Customer Number <input type="text"/></p> <p>NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.</p> <p>The reasons for this request are:</p> <p>This request is being made at the request of MailTV.</p>	

<b>CORRESPONDENCE ADDRESS</b>			
<p>1. <input type="checkbox"/> The correspondence address is NOT affected by this withdrawal.</p> <p>2. <input checked="" type="checkbox"/> Change the correspondence address and direct all future correspondence to:</p> <p><input type="checkbox"/> The address associated with Customer Number: <input type="text"/></p> <p>OR</p>			
<input checked="" type="checkbox"/> Firm or Individual Name	Steptoe & Johnson LLP c/o Scott W. Doyle, Esq.		
Address	1330 Connecticut Avenue, NW		
City	Washington	State	DC
Zip	20036		
Country	U.S.A.		
Telephone	(202) 429-6227	Email	sdoyle@steptoe.com
Signature			
Name	Thomas E. Ciotti	Registration No.	21,013
Date	December 9, 2005	Telephone No.	(650) 813-5702
<p>NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.</p>			

<p>I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.</p> <p>Dated: December 9, 2005</p>	
<p>Signature:  (Lindsay Seydel)</p>	

pa-1031134

PAGE 4/7 \* RCVD AT 12/9/2005 10:04:52 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/24 \* DNIS:2738300 \* CSID:650 813 5993 \* DURATION (mm:ss):02-26

BEST AVAILABLE COPY

PTO/SB/63 (04-05)

Approved for use through 11/30/2005. OMB 0651-0055

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/768,232
Filing Date	January 30, 2004
First Named Inventor	E GOTTFURCHT
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	578962000102

To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.  
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or  
 the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

This request is being made at the request of MailTV.

**CORRESPONDENCE ADDRESS**

1.  The correspondence address is NOT affected by this withdrawal.  
 2.  Change the correspondence address and direct all future correspondence to:

The address associated with Customer Number:

OR

Firm or Individual Name: Steptoe & Johnson LLP  
c/o Scott W. Doyle, Esq.

Address: 1330 Connecticut Avenue, NW

City: Washington State: DC Zip: 20036

Country: U.S.A.

Telephone: (202) 429-6227 Email: [sdoyle@steptoe.com](mailto:sdoyle@steptoe.com)

Signature: 

Name: Thomas E. Clotti

Registration No. 21,013

Date: December 9, 2005

Telephone No. (650) 813-5702

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 9, 2005

Signature:  (Lindsay Seydel)

pa-1031134

PAGE 57 \* RCVD AT 12/9/2005 10:04:52 PM [Eastern Standard Time] \* SVR:USPTO-EFXRF-6/24 \* DNI:2738300 \* CSID:650 813 5993 \* DURATION (mm:ss):02-26

**BEST AVAILABLE COPY**